



PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Office of State Procurement Services.

INSTRUCTIONS: Please provide the requested information in the white spaces below. All responses (except signatures) must be typed; no hand-written forms will be accepted. See the guidance document posted with this form on the Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW				
Department Office/Division/Program:		DHHS/MCDC/Data, Research, and Vital Statistics		
Department Contract Administrator or Grant Coordinator:		Shawn Belanger		
(If applicable) Department Reference #:		OIT-14-092I		
(Contract/Amendment/Grant) Amount:	Current:	\$4,567,960.06	Advantage CT / RQS #: CT 10A 20140117*2470	
	Amend:	\$786,392.00		
	Revised:	\$5,354,060.06		
CONTRACT	Proposed Start Date:		Proposed End Date:	
	Original Start Date:	1/1/2014	Effective Date:	1/1/2025
AMENDMENT	Previous End Date:	12/31/2024	New End Date:	12/31/2025
	Project Start Date:		Grant Start Date:	
GRANT	Project End Date:		Grant End Date:	
	Vendor/Provider/Grantee Name, City, State:	LexisNexis VitalCheck Network, INC Brentwood, TN		
Brief Description of Goods/Services/Grant:		Support, maintenance and enhancements for DAVE system		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
<input type="checkbox"/>	A. Competitive Process	<input type="checkbox"/>	G. Grant
<input checked="" type="checkbox"/>	B. Amendment	<input type="checkbox"/>	H. State Statute/Agency Directed
<input checked="" type="checkbox"/>	C. Single Source/Unique Vendor	<input type="checkbox"/>	I. Federal Agency Directed
<input type="checkbox"/>	D. Proprietary/Copyright/Patents	<input type="checkbox"/>	J. Willing and Qualified
<input type="checkbox"/>	E. Emergency	<input type="checkbox"/>	K. Client Choice

<input type="checkbox"/>	F. University Cooperative Project	<input type="checkbox"/>	L. Other Authorization
--------------------------	-----------------------------------	--------------------------	------------------------

Please respond to ALL of the questions in the following sections.

PART III: SUPPLEMENTAL INFORMATION

1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.

The Database Application of Vital Events (DAVE) facilitates the handling of birth, death, and marriage certificates. There are the requirements to send some of data to the National Center for Health Statistics (NCHS) through specific messaging known as Fast Healthcare Interoperability Resources (FHIR). FHIR is a set of established rules and specifications for the secure exchange of electronic health care data. The DAVE system will require additional system development to reduce inoperability between the NCHS and each vendor's system.

The purpose of this amendment is to add funds for functional enhancements to comply with NCHS and for continuation of system support and maintenance.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.

The RFP was issued in 2009. Vital Check was awarded the bid and since then has been continuously changing to meet the advances in technology. In the summer of 2021, the program reached out to other states and jurisdictions to see how much their systems costs were for both initial development and yearly maintenance costs. It was deemed that it was not cost effective to issue a new RFP and develop a new system, as the existing system remained competitive with its technology and where the State had a vendor who was able to, in a cost-effective manner, complete enhancements. At that time, the DAFS Director of IT Procurement supported the decision to continue with the existing cost-effective system through sole source.

3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

The maintenance and development fees are reasonable based on information collected from other states; their costs were between \$3-\$7 million dollars to build their systems. Costs not included in the development include migration of legacy records, training users to use the new system, and OIT costs to vet the new systems and to ensure security compliance. The annual maintenance fees are more than reasonable when compared to other states, in fact, Maine was in the bottom half (for less annual maintenance fees) of the states that shared their cost information.

4. Describe the plan for future competition for the goods or services.

The Department intends to RFP this service resulting in a 1/1/2027 contract start date.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

Does this request utilize ARPA/MJRP funds?

- Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).
- Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.

No – If No, proceed to Part V.

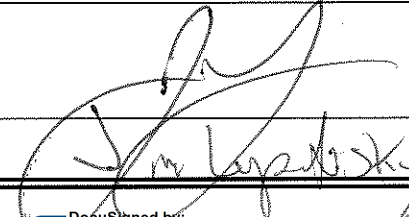
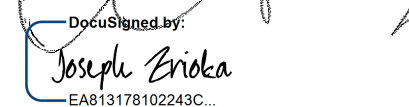
PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS Title 5, §18 and §18-A, in harmony with MRS Title 17, §3104.

The requesting department signatory understands and acknowledges Maine's Conflict of Interest statutes.

PART VI: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:			
Signature of DAFS Procurement Official:			
Typed Name:	Joseph Zrioka, Director of IT Procurement	Date:	4/7/2025